

Part D Voluntary Prescription Drug Benefit Program

Benefits and Costs

for People with Medicare

If the Customer Receives:	Premium Amount	Co-Payments	Deductibles	Coverage Gap											
Medicare & Medicaid <i>(dual eligible).</i>	\$0.00 <i>(unless the person chooses a plan with a premium that exceeds the standard premium).</i>	Income ≤100% FPL (\$798/\$1070) <ul style="list-style-type: none">• \$1.00 for generic• \$3.00 for brand name• No co-pay for costs above \$5,100 Income >100%FPL <ul style="list-style-type: none">• \$2.00 for generic• \$5.00 for brand name.• No co-pay for costs above \$5,100 Note: Co-pays reduce to \$0.00 for a person in a nursing facility (NF) or ICF-MR for the entire month.	None	None											
<ul style="list-style-type: none">• QMB-only• SLMB, or• QI <i>(Deemed Eligible)</i>	\$0.00 <i>(unless the person chooses a plan with a premium that exceeds the standard premium)</i>	QMB-only <ul style="list-style-type: none">• \$1.00 for generic• \$3.00 for brand name• No co-pay for costs above \$5,100 SLMB or QI <ul style="list-style-type: none">• \$2.00 for generic• \$5.00 for brand name• No co-pay for costs above \$5,100	None	None											
Medicare & Low Income Subsidy <i>(no Medicaid and no QMB, SLMB or QI)</i> Resources ≤ \$10,000/\$20,000 and Income <150% FPL for the family size: <ul style="list-style-type: none">• 1 – \$1,197• 2 – \$1,604• 3 – \$2,012• 4 – \$2,419• 5 – \$2,827• 6 – \$3,234	The premium is 0% - 100% of the standard premium based on income. <i>For example, if the standard premium is \$37 and the income is:</i>		Income ≤ 135% & Resources ≤ \$6000/\$9000		None.										
						<ul style="list-style-type: none">• \$2.00 for generic• \$5.00 for brand name• No co-pay for costs above \$5,100	None								
			Higher Income or Resources												
			<ul style="list-style-type: none">• 15% of drug costs for first \$5,100 in prescription costs. After \$5,100 the co-pays are reduced to \$2.00 for generic and \$5.00 for brand name.	\$50.00											
	<table><tr><th>% of FPL</th><th>Premium</th></tr><tr><td>≤135</td><td>\$ 0.00</td></tr><tr><td>136-140</td><td>\$ 9.25</td></tr><tr><td>141-145</td><td>\$18.50</td></tr><tr><td>146-149%</td><td>\$27.75</td></tr><tr><td>150%</td><td>\$37.00</td></tr></table>	% of FPL	Premium	≤135		\$ 0.00	136-140	\$ 9.25	141-145	\$18.50	146-149%	\$27.75	150%	\$37.00	
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Medicare <i>(Standard Part D costs)</i> Excess Income <i>(>150% FPL) and/or Excess Resources</i> <ul style="list-style-type: none">• >\$10,000 single• >\$20,000 couple	About \$37.00 monthly <i>(unless the person choose a plan with a premium that exceeds the standard premium)</i>	<ul style="list-style-type: none">• From \$250.01 to \$2250, 25% of the drug costs After \$5,100 co-pays are reduced to <ul style="list-style-type: none">• \$2.00 for generics• \$5.00 for brand name or• 5% of drug costs, whichever is higher.	\$250.00	All prescription costs from \$2,250.01 through \$5,100.00 are the customer's responsibility.											